

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

FOR: CENTERS FOR MEDICAID AND MEDICAID SERVICES

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

1. TRANSMITTAL NUMBER:
TN 03-016

2. STATE
Ohio

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE
SOCIAL SECURITY ACT (MEDICAID) Title XIX

4. PROPOSED EFFECTIVE DATE
July 1, 2003

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN ☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:
42 CFR 431, Subpart M

7. FEDERAL BUDGET IMPACT:

a. FFY 2003 \$ -0-
b. FFY 2004 \$ -0-

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 4.16D, pages 1 through 15

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):

Attachment 4.16D, pages 1 through 13

Ohio (03-016)

*Approved: 12/24/03
Effective: 07/01/03*

10. SUBJECT OF AMENDMENT:

This amendment contains the interagency agreement between the Ohio Department of Job and Family Services and the Ohio Department of Health for the survey and certification of long term care facilities, enforcement, and resident assessment data collection. This agreement is effective July 1, 2003 through June 30, 2004.

11. GOVERNOR'S REVIEW (Check One):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

x OTHER, AS SPECIFIED: The Governor's office has delegated review to the ODJFS Director.

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:

Thomas J. Hayes

14. TITLE:

Director

15. DATE SUBMITTED:

September 25, 2003

16. RETURN TO:

Becky Jackson
Bureau of Health Plan Policy
Ohio Department of Job and Family Services
30 East Broad Street, 27th floor
Columbus, Ohio 43215-3414

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:
9/29/03

18. DATE APPROVED:
12/22/03

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

July 1, 2003

20. SIGNATURE OF REGIONAL OFFICIAL:

Cheryl Harris

21. TYPED NAME:

Cheryl A. Harris

22. TITLE: Associate Regional Administrator
Division of Medicaid and Children's Health

23. REMARKS:

RECEIVED

SEP 29 2003

DMCH - IL/IN/OH

**INTERAGENCY AGREEMENT
BETWEEN
THE OHIO DEPARTMENT OF JOB AND FAMILY SERVICES
AND
THE OHIO DEPARTMENT OF HEALTH**

A-04-07-0075

I. PURPOSE

This Agreement is entered into by the Ohio Department of Job and Family Services (hereinafter "ODJFS") and the Ohio Department of Health (hereinafter "ODH") for the purpose of defining the responsibilities of both parties as they relate to administration of the Ohio Medical Assistance program (hereinafter "the Medicaid program"), ODH's survey and certification of long-term care facilities, enforcement actions against long-term care facilities with deficiencies, activities regarding resident assessment data collection and use and franchise fee assessments.

II. AUTHORITY

This Agreement is written in accordance with and pursuant to:

- A. Sections 1819, 1902(a)(5), 1902(a)(9), 1902(a)(33) and 1919(h)(2) of the Social Security Act;
- B. 42 CFR (Code of Federal Regulations), parts 483 and 488;
- C. 42 CFR, part 431, subpart A, D and M;
- D. 42 CFR, part 442, subpart A;
- E. 45 CFR, parts 80, 84 and 90; and
- F. Sections 3721.022, 3721.52, 5111.01, 5111.35, 5111.37, 5111.38 and 5111.62 of the Ohio Revised Code.

III. RESPONSIBILITIES OF ODJFS

A. General

In accordance with Section 1902(a)(5) of the Social Security Act, as amended, 42 CFR 431.610, and the Ohio State Plan for Medical Assistance, and pursuant to Section 5111.01 of the Ohio Revised Code, ODJFS is designated as the single state agency responsible for supervising the administration of the Medicaid program under Title XIX of the Social Security Act.

B. Survey, Certification and Complaints

ODJFS shall perform the following duties relating to the certification process for long-term care facilities:

1. Accept and refer to ODH applications submitted by long-term care facilities requesting certification and participation in the Medicaid program.
2. Receive, review and process all certification and transmittal forms submitted by ODH to ensure the timely certification and re-certification of long-term care facilities.
3. Issue provider agreements in accordance with the certification of compliance set forth by ODH (or if a Medicare-participating facility, the U.S. Department of Health and Human Services, hereinafter referred to as "DHHS"). This shall not be construed to prevent ODJFS from refusing to execute a provider agreement, or from canceling an agreement with a certified facility, if it has determined that such an agreement would not be in the best interests of the recipients of services provided by the facility in accordance with the Ohio

IN #02-015 APPROVAL DATE
SUPERSEDES
TN #02-015 EFFECTIVE DATE 07/01/03

Revised Code and Administrative Code, or the facility has failed to meet the civil rights requirements set forth in 42 CFR Part 488.8 and 45 CFR Parts 80, 84 and 90, or other pertinent statutes or regulations.

4. Notify ODH in a timely fashion of all issuances, assignments, amendments, expirations, terminations, and denials of provider agreements.
5. Receive, process and refer to ODH any complaints regarding alleged violations of certification standards, including, but not limited to, hazards to the health and safety of residents in long-term care facilities participating in the Medicaid program.
6. Receive, process and investigate or refer to ODH for investigation, complaints alleging violation of a civil rights requirement by a long-term care facility.
7. Accept and evaluate recommendations from ODH following ODH's investigation of a long-term care facility's alleged violation of civil rights.
8. Certify state funds available and submit to The Centers for Medicaid and Medicare Services (CMS), with a copy to ODH, quarterly estimates of expenditures by the forty-fifth (45th) day before the beginning of the quarter covered by the report. ODJFS shall also submit to CMS, Quarterly Expenditure Reports by the thirtieth (30th) day following the end of the quarter.
9. Notify ODH when ODJFS identifies any discrepancies in a facility's number of certified beds.
10. Notify ODH when ODJFS receives an initial notice from a facility about a change in the legal entity operating the facility, including sales, leases, corporate mergers, partnership changes and stock exchanges.

C. Enforcement

ODJFS shall perform the following duties relating to the enforcement process for long-term care facilities:

1. ODJFS will develop any rules or procedures necessary for the functions listed in Article III (C) (2) to Article III (C) (10) of this Agreement in coordination with ODH.
2. ODJFS will establish, maintain and administer the Residents Protection Fund created by Section 5111.62 of the Ohio Revised Code. ODJFS, in coordination with ODH and the Ohio Department of Aging (ODA), will develop rules for maintenance and administration of the Fund and will adopt those rules in accordance with Chapter 119 or Chapter 111 of the Ohio Revised Code.
3. ODJFS will collect fines and interest imposed by ODH in accordance with applicable federal and state laws and regulations.
4. ODJFS will withhold Medicaid payments for Medicaid-eligible residents of nursing facilities when ODH has issued an order denying payment in accordance with applicable federal and state laws and regulations.
5. ODJFS will determine whether Medicaid provider agreements may be issued to nursing facilities under reimbursement-related statutes and rules of the Ohio Administrative Code.
6. ODJFS will issue, deny and terminate provider agreements to nursing facilities in accordance with ODH's decisions regarding the facilities' certification under applicable federal and state laws and regulations, guidelines and procedures, subject to the facilities' compliance with the reimbursement-related requirements referenced in Article III (C) (5) of this Agreement. ODJFS will not provide facilities with adjudication hearings when ODH terminates their Medicaid participation.
7. ODJFS will make available or deny reimbursement to nursing facilities during appeals of ODH enforcement actions in accordance with applicable state and federal law.

SUPERSEDES

TN #03-05 EFFECTIVE DATE 07/01/03

8. ODJFS will decide reimbursement issues arising from operation of nursing facilities by temporary managers and special masters.
9. ODJFS will arrange for transfer of residents of nursing facilities when they are closed or their Medicaid participation is terminated under applicable federal and state laws and regulations pursuant to Chapter IV of the ODJFS Long-Term Care Facility Relocation Handbook entitled "Overview of Inter-Agency Relocation Roles."
10. ODJFS will monitor and oversee ODH's operation of enforcement by:
 - a. Reviewing the monthly report on enforcement action taken required by Article IV (E) (15) of this Agreement. ODH shall submit this report to ODJFS upon commencement of enforcement activity.
 - b. Reviewing compliance with the terms of this Agreement, including hiring and training of staff to perform enforcement-related functions, submission to ODJFS of specified reports, and completion of documentation that allows ODJFS to issue provider agreements as required by applicable state and federal laws and regulations.
 - c. Reviewing ODH's budgets and expenditures related to enforcement activities, insofar as federal funding of this function is concerned.

D. Notification of Changes to Ohio Administrative Code

ODJFS shall notify ODH of rule changes related to this Agreement not later than 10 (ten) days before initial filing of said rules with the Joint Committee on Agency Rule Review.

E. The ODJFS Agreement Manager is the Chief of the Bureau of Long Term Care Facilities.

IV. RESPONSIBILITIES OF ODH

A. General

1. In accordance with Sections 1902(a)(9) and 1902(a)(33) of the Social Security Act, 42 CFR 431.610, Section 3721.022 of the Ohio Revised Code, and the Ohio State Plan for Medical Assistance, ODH is designated as the state health standard setting authority and state health survey agency responsible for certifying and determining compliance of long-term care facilities with the requirements for participation in the Medicaid program.
2. As the dedicated survey agency, ODH shall perform the following duties specifically related to the survey and certification of skilled nursing facilities (SNFs), or nursing facilities (NFs), and intermediate care facilities for the mentally retarded/developmentally disabled (ICF/MRs).
3. In accordance with 42 CFR Part 488, Subparts A, E, and F and 42 CFR Part 431, Subpart M, conduct on-site surveys as frequently as required by Medicaid statutes and regulations to determine compliance.
4. ODH shall notify ODJFS of rule changes related to this Agreement no later than ten (10) days prior to submission of said rules to the Public Health Council or filing of the rules with the Joint Committee on Agency Rule Review (JCARR).
5. ODH shall submit to ODJFS quarterly estimates of expenditures at least fifty-five (55) days before the beginning of the quarter covered by the report. The above shall be submitted in accordance with federal and state guidelines unless otherwise specified in writing.
6. ODH shall make available upon request any additional accounts, records, or other information as required by ODJFS, DHHS, the U.S. Accounting Office, the Auditor of State, or their agents, to substantiate any estimate, expenditures, or report as necessary for auditing purposes. ~~the above shall be submitted in accordance with federal and state guidelines unless otherwise specified in writing.~~

IN # ~~03-01~~ APPROVAL DATE

SUPERSEDES

TN # ~~03-01~~ EFFECTIVE DATE 07/01/03

7. The ODH Quarterly Expenditure Reports must be submitted to ODJFS, Bureau of Accounting, within twenty-five (25) days following the end of each calendar quarter.

3. Survey and Certification

1. ODH shall document findings regarding a facility's non-compliance with any Medicaid certification requirement, including a listing of deficiencies and findings as specified in 42 CFR 431, Subpart M.
2. ODH shall notify ODJFS, in writing, of certification determinations for new and existing facilities and of any changes in the status of certification for existing facilities.
3. Upon determining the facility's compliance or non-compliance with Medicaid participation requirements, ODH shall certify to ODJFS the facility's compliance status and take necessary action in accordance with 42 CFR Parts 431, 442, and 488 and applicable state law and rules.
4. ODH shall submit to ODJFS's Bureau of Long-Term Care Facilities (BLTCF) by the fifteenth (15th) day of each month, certification status and reconciliation reports for ODH's preceding month, which shall include:
 - a. Long-Term Care Adverse Actions;
 - b. Certification Activity Summary;
 - c. Summary of Certifications Due with Federal Financial Participation (FFP) At Risk, including Facility's Name and Number;
 - d. Licensure Activity including:
 - (1) Issuance of new licenses or revised licenses and information regarding change of operator.
 - (2) Enforcement Actions (Name of Facility)
 - (3) Closed Homes (Name of Facility)
 - e. Changes in the legal entity operating the facility, including initial notices of sales, leases, mergers, partnership changes, and stock exchanges.
5. ODH shall provide ODJFS with one (1) copy of the statement of deficiencies and plan of correction for each facility and any letters to a long-term care facility regarding adverse administrative action.
6. ODH shall take action to ensure that appropriate survey staff attend required hearings.

C. Complaints

1. ODH shall receive and investigate complaints alleging a long-term care facility's non-compliance with Medicaid participation requirements, jeopardy to the health and safety of any long-term care facility residents, or a facility's failure to meet a civil rights requirement.
2. ODH shall provide to ODJFS the CMS Form 562, which identifies each complaint filed, and provides the name of the Medicaid long-term care facility, the type of complaint, and the time frame for completing the complaint investigation.
3. ODH shall comply with the time frames and requirements set forth in the State Operations Manual pertaining to the investigation of complaints.
4. ODH shall submit to ODJFS completed copies of all complaint reports concerning Title XIX providers reported to CMS on Form 562 at least monthly.

TN # 03-016 APPROVAL DATE _____
 SUPERSEDES
 TN # 02-015 EFFECTIVE DATE 07/01/03

D. Appeals

ODH shall conduct an appeal process in accordance with applicable state law and rule, 42 CFR 431, Subpart D, and the State Operations Manual for facilities whose certification has been denied, terminated, or not renewed or in which other remedies have been imposed.

E. Enforcement

ODH shall perform the duties listed in this Section relating to the enforcement process for nursing facilities. To the extent that such a delegation is required or permitted by law, ODJFS hereby specifically delegates to ODH the authority to perform these duties.

1. ODH, pursuant to applicable state law and federal regulations, guidelines, and procedures, and Article IV (A) through (D) of this Agreement, will operate the Medicaid survey and certification process for Nursing Facilities. ODH will adopt any rules and/or procedures necessary for this function. ODH's survey and certification responsibilities will include, but are not limited to the following:
 - a. Determination of deficiencies;
 - b. Exit interviews;
 - c. Required notifications following surveys;
 - d. Preparation of statements of deficiencies;
 - e. Informal review of deficiency citations;
 - f. Follow-up surveys when necessary under applicable state law and federal regulations, guidelines, and procedures.
 - g. Complaint investigations under applicable state law and federal regulations, guidelines, and procedures.
2. ODH, in accordance with applicable state law and federal law and regulation, will determine which remedies to impose against Nursing Facilities with deficiencies.
3. ODH, in accordance with applicable state and federal law and regulations, will impose remedies against Nursing Facilities with deficiencies, including the following:
 - a. Termination of Medicaid participation. ODH shall take this action by terminating certification.
 - b. Appointment of temporary managers.
 - c. Application to the Court of Common Pleas for injunctions and appointment of special masters.
 - d. Issuance and termination of orders denying Medicaid payments for all Medicaid-eligible residents. ODH will immediately notify ODJFS of the issuance of such orders.
 - e. Imposition of fines (civil money penalties) and determination of the duration and amount of fines.
4. ODH will approve or disapprove plans of correction submitted by facilities, in accordance with applicable state and federal laws and regulations, guidelines, and procedures.
5. In accordance with applicable state and federal laws and regulations, unless a condition of immediate jeopardy exists, ODH may permit a nursing facility to continue to participate in the Medicaid program for up to six (6) months after the exit interview. When a condition of immediate jeopardy exists, ODH will terminate the facility's participation in the Medicaid program no later than twenty-three (23) days from the survey, if the facility does not eliminate the immediate jeopardy prior to the date of termination.

SUPERSEDES

TN # 03-015 EFFECTIVE DATE 07/01/03

6. ODH will issue notice to Nursing Facilities of remedies being imposed, in accordance with applicable state and federal laws and regulations.
7. ODH will provide notice to ODJFS of survey results, certification decisions, remedies that have been imposed on Nursing Facilities, and emergency actions, in accordance with applicable requirements.
8. ODH will appoint monitors for Nursing Facilities in accordance with applicable state and federal laws and regulations.
9. ODH will conduct administrative appeal proceedings in accordance with applicable state and federal laws and regulations when imposition of remedies occurs prior to or during the pendency of the adjudication hearing.
10. ODH will conduct administrative appeal proceedings in accordance with applicable state and federal laws and regulations when imposition of a remedy will not occur until after the completion of an adjudication hearing.
11. In the case of an emergency as defined in Section 5111.35 of the Ohio Revised Code, ODH will take all appropriate actions in accordance with applicable state and federal laws and regulations.
12. ODH will appoint a temporary manager or petition to the Court of Common Pleas for appointment of a special master when necessary during closure of a Nursing Facility or after termination of its Medicaid participation, in accordance with applicable state and federal laws and regulations.
13. ODH will issue orders denying Medicaid payments to Nursing Facilities, in accordance with applicable state and federal laws and regulations, when the facilities fail to correct deficiencies in accordance with their plans of correction within three (3) months after the exit interview or when they are cited for substandard quality of care on three consecutive standard surveys. ODH will immediately notify ODJFS of the issuance of such orders.
14. ODH will impose remedies on Nursing Facilities for purposes of the Medicare program to the extent authorized by federal regulations, guidelines and procedures.
15. ODH will provide ODJFS, by the fifteenth (15th) day of each month, a report of all enforcement action initiated, pending, and completed against Nursing Facilities during the previous month. This report will include, as a minimum, the following information:
 - a. Facility name and location;
 - b. Nature of enforcement action taken;
 - c. Status of action;
 - d. Scheduled hearing dates;
 - e. Hearing status;
 - f. Other relevant information agreed upon by ODH and ODJFS.

F. Records

ODH shall maintain on file all information and reports used in determining each facility's compliance with federal and state standards for a minimum of five (5) years, and shall make such information readily accessible to ODJFS, DHHS, the U.S. Government Accounting Office, the Auditor of State, and their respective agents. If a compliance review is in progress, or if compliance findings have not been resolved, the records required above shall be retained until final resolution.

TN #03-016 APPROVAL DATE _____

SUPERSEDES

TN #02-015 EFFECTIVE DATE 07/01/03

G. Delegation of Responsibilities

The certification authority assigned to ODH under this Agreement shall not be delegated by ODH to any other governmental or private entity. However, ODH may subcontract for and utilize the services, facilities, and records of any state or local government agency or qualified private contractor to assist in performing its duties and responsibilities.

Any subcontracts entered into by ODH shall be written in accordance with this Agreement, and no subcontract provision shall supersede any statements herein. ODH shall submit to ODJFS a copy of any subcontract which delegates any of ODH's survey and certification responsibilities for Medicaid Nursing Facilities.

1. ODH will, upon request, provide ODJFS with an update of the total number of individuals on the nurse aide registry. ODJFS shall be provided an opportunity to review and provide feedback on all proposed contracts, including revisions and addendums, with the testing service chosen by ODH to provide state-administered testing of Nursing Facility nurse aides.
 - a. ODH shall notify ODJFS, BLTCF of any state or federal change or new development in Nursing Facility nurse aide training and/or testing which might affect Medicaid reimbursement policy and/or procedure.
 - b. ODH shall provide ODJFS and BLTCF with current listings of all state-approved Nursing Facility nurse aide training and competency evaluation (TCE) and train-the-trainer (TTT) programs. ODH shall also notify ODJFS of all TCE and TTT programs for which state approval is revoked.
2. ODH is designated as the official contact for the Minimum Data Set (MDS). ODJFS and ODH shall participate jointly in the MDS Automation Project. ODH or ODJFS shall notify the other of any state or federal change in the MDS requirements which might affect the state's plan for implementing the MDS.
3. ODH shall disapprove any Nurse Aide Training and Competency Evaluation Program (NATCEP) or competency evaluation program conducted in or by a facility that has been subject to any of the following:
 - a. An extended or partially extended survey;
 - b. Denial of payment for Medicaid or Medicare admissions; or
 - c. A civil money penalty of Five Thousand and 00/100 Dollars (\$5,000.00) or more has been assessed against the facility.

Notwithstanding the above, ODH may grant a waiver to a facility permitting continued operation of a training program if conditions warrant such a waiver.

H. Franchise Fees

1. In accordance with ORC Section 3721.52, by no later than the first day of June, ODH will provide ODJFS with information required to calculate nursing home franchise fees. The information shall reflect the status current as of the first day of May and include:
 - a. The number of beds in each licensed nursing home;
 - b. The number of beds in each certified skilled nursing facility, nursing facility, or ICF/MR;
 - c. The number of beds in each licensed home for the aged; and
 - d. The number of hospital beds registered as long-term care beds.
2. For each nursing home ODH will provide ODJFS with the following:
 - a. Facility name;

TN # 03-016 APPROVAL DATE _____

SUPERSEDES

TN # 02-015 EFFECTIVE DATE 07/01/03

- b. Facility address;
- c. County location;
- d. Home number as assigned by ODH;
- e. Home type, including certified county operated homes;
- f. Active or closed status, with closure date for all facilities closed within the preceding twelve (12) months;
- g. Phone numbers; and
- h. Name of legal entity operating the home.

I. The ODH Agreement Manager is the Chief of the Division of Quality Assurance.

V. RESIDENT ASSESSMENT INSTRUMENT

42 CFR Section 483.20 required that Nursing Facilities conduct comprehensive resident assessments consistent with the requirements for each state's specified resident assessment instrument (RAI) and perform quarterly reviews to assure the continued accuracy of the assessments. Ohio has selected the Minimum Data Set (MDS 2.0) as the state-specified RAI and quarterly review document. The Ohio Medicaid Nursing Facility payment system uses the MDS 2.0 to establish case mix levels of facilities and determine direct care rates.

ODJFS and ODH will cooperate in the joint development and implementation of any future changes of the state-specified RAI or quarterly review document, and in the joint development and maintenance of MDS training programs, manuals and other educational materials.

A. ODH Responsibilities:

1. ODH shall report to ODJFS for all Nursing Facilities surveyed:
 - a. Assessment-related survey finds; and
 - b. Consolidated resident-specific findings based on the survey sample that was selected in accordance with CMS guidelines and findings from surveyors' quality of care assessment.

The formats of the survey findings and the resident-specific reports shall be designed by ODH in consultation with ODJFS. Additional sampling methodology may be used if mutually agreed upon by ODH and ODJFS. Copies of the findings reports shall be sent to ODJFS monthly.

2. ODH shall report ICF/MR survey findings to ODJFS if such facilities are out of compliance with the federal conditions of participation concerning active treatment (42 CFR 483.440).
3. ODH shall cooperate in the provision of training of Nursing Facilities and Skilled Nursing Facilities/Nursing Facilities providers on the RAI and use of the facility certification and Medicaid case mix payment system. Training may be provided by state employees or entities with whom ODH and/or ODJFS has contracted. ODH shall select and supervise content of training sessions related to certification of facilities, including the use of resident assessment protocols and triggers, and development of care plans, and select and/or approve presenters.
4. ODH, in consultation with ODJFS, shall develop systems to conduct inter-rater reliability studies. Inter-rater reliability protocols, sampling methodology and review frequency must be acceptable and approved by both ODJFS and ODH.
5. ODH shall provide ODJFS documentation on ODH cost allocation ~~on per person~~ ^{for Medicare} Programs as is necessary for ODJFS to meet its duties and obligations. ODH shall cooperate with ODJFS to identify the documentation that is required.

~~03-01-16~~ ⁰³⁻⁰¹⁻¹⁶ APPROVAL DATE
 SUPERSEDES
 TN # 02-015 EFFECTIVE DATE 07/01/23

ODJFS Responsibilities:

1. ODJFS shall provide ongoing training of health care facility surveyors on the procedures for data collection, completing and reporting findings of the RAI as it pertains to the Medicaid payment system.
2. ODJFS shall notify ODH of any facilities required to refund overpayments for direct care which were discovered through the ODJFS exception review process in a form designed or designated by ODH that facilitates citing deficiencies. The format of such notice shall be approved by ODJFS.
3. ODJFS shall cooperate in the provision of training of Nursing Facility and Skilled Nursing Facility/NF providers on the RAI and its use in the facility certification and Medicaid case mix payment system. Training may be provided by state employees or entities with whom ODJFS and/or ODH has contracted. ODJFS shall select and supervise content and training sessions related to the case-mix payment system, and select and/or approve presenters.
4. ODJFS reserves the right to develop systems and procedures needed to monitor and verify MDS data used in setting Title XIX nursing facility direct care rates and in revising Title XIX payment policies and procedures.

MDS 2.0 Data System

1. ODH shall have overall responsibility for fulfilling federal requirements for the operation of the MDS 2.0 data system. ODH shall administer the data collection process and provide technical assistance to all providers so that providers will be able to submit accurate data in a timely manner.
 - a. ODH shall maintain an MDS 2.0 Help Desk to respond to facility and software vendor questions related to MDS 2.0 coding and transmission. The Help Desk staff shall have the expertise needed to provide same day response to questions related to dial-in requirements, including Netscape transmission procedures. ODH will notify ODJFS within seventy-two (72) hours of any new MDS 2.0 coding instructions, interpretations and/or clarifications given to nursing facility staff either in writing or through the Help Desk. ODH shall consult with ODJFS on MDS 2.0 questions related to items used in the Medicaid payment system prior to issuing new or revised instructions, interpretations and/or clarifications.
 - b. ODH shall maintain a Vendor Hot Line to respond to software vendor questions related to the CMS MDS 2.0 systems specifications and record layout required, and/or recommended edits, testing procedures, etc. Hot Line staff shall have the expertise necessary to assist programmers and system analysts in designing/coding software applications for facility use, and shall provide same or next day response to all vendor inquiries.
 - c. ODH shall, in coordination with ODJFS, maintain and administer a process for correcting key MDS fields identified by CMS. ODH shall process corrections within thirty (30) days of receipt.
2. ODH shall maintain the MDS 2.0 data system. For any MDS diskettes collected, ODH shall maintain these original source documents. ODH and ODJFS shall jointly establish the maintenance schedule for the aforementioned diskettes to ensure compliance with all applicable state and federal requirements.
3. ODH shall ensure ODJFS read only access to the data base including the Data Management System on a twenty-four (24) hour per day/seven (7) days per week basis. Full access includes the ability to view, query, browse, print and copy/transfer MDS data to ODJFS data bases using established data transfer methods including automatic data replication techniques. ODH and ODJFS shall mutually agree on a schedule for maintenance down time. Except in an emergency, ODH shall notify ODJFS of any changes to the agreed upon schedule two (2) weeks prior to the effective time of the change. Within seven (7) days of receipt of such notice ODJFS shall notify ODH if the change would interfere with the ability of ODJFS to carry out its duties and responsibilities. ODH shall notify ODJFS of emergency unscheduled down time of the data system and provide additional notification if the down time is expected to exceed four (4) hours.

TN #03-016 APPROVAL DATE _____

SUPERSEDES

TN #01-015 EFFECTIVE DATE 07/01/03